

**DECLARATION  
AND POWER OF ATTORNEY  
Original Application**

ATTORNEY'S DOCKET NO. (IF ANY)

As a below named inventor, I declare that the information given herein is true, that I believe that I am the original, first and sole inventor if only one name is listed at 201 below, or a joint inventor if plural inventors are named below at 201-203, of the invention entitled:

**SHAFT FOR GOLF CLUB**

which is described and claimed in:

☒ the attached specification or ☐ the specification in application Serial No. \_\_\_\_\_ filed \_\_\_\_\_  
(for declaration not accompanying application)

that I do not know and do not believe that the same was ever known or used in the United States of America before my or our invention thereof or patented or described in any printed publication in any country before my or our invention thereof, or more than one year prior to this application, or in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months prior to this application, that I acknowledge my duty to disclose information of which I am aware which is material to the examination of this application in accordance with 37 CFR 1.56(a), and that no application for patent or inventor's certificate on this invention has been filed by me or my legal representatives or assigns in any country foreign to the United States of America except as identified below. I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

FOREIGN APPLICATION(S), IF ANY, FILED WITHIN 12 MONTHS PRIOR TO THE FILING DATE OF THIS APPLICATION			
COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. 119
Japan	Hei 11-130169	11/May/1999	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Japan	2000-116924	18/Apr./2000	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
ALL FOREIGN APPLICATIONS, IF ANY, FILED MORE THAN 12 MONTHS PRIOR TO THE FILING DATE OF THIS APPLICATION			

**POWER OF ATTORNEY:** As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: Morris Relson #15,108, Gordon D. Coplein #19,165, William F. Dudine, Jr. #20,569, Michael J. Sweedler #19,937, S. Peter Ludwig #25,351, Paul Fields #20,298, Joseph B. Lerch #26,936, Melvin C. Garner #26,272, Ethan Horwitz #27,646, Beverly B. Goodwin #28,417, Adda C. Gogoris #29,714, Martin E. Goldstein #20,869, Bert J. Lewen #19,407, Henry Sternberg #22,408, all of the firm of Darby & Darby P.C., 805 Third Avenue, New York, New York 10022

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202	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME
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	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY ZIP CODE
203	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY ZIP CODE

☐ Additional matter on page 2 (Form PTO-1298). (When page 2 is used, all signatures should be placed on page 2.)

I further declare that all statements made herein of my own knowledge are true and that all statements made in information and belief are believed to be true; and further that the statements made with the knowledge that willful false statements are and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201 Akira Unosawa	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE June 16, 2000	DATE	DATE